## **ENTRY BLANK**

PLEASE TYPE	OR PRINT	Entered prev	vious May Show
		(☑ yés	□ no
☑ Ms.	LINDA (	PACUET	T
☐ Mr. Artist_	21007	RUCKEI	1
Permanent Address	189 ROYI	AL RD.	(Last Name Last) CLEVELAN
44110	Tel. (2/6)	481-50	(Last Name Last) CLEVELAN City
Zip	Area Code		
Temporary or Studio Address	5		
	Street		City
	Tel. ( )		
Zip	Area Code		
Western Reserv	ve, which county	were you born	n in?
If May Show a	ntries are not acc	cented or not s	old:
/ '	pick up at Muse	•	oid.
	nould dispose of.		
	nould ship to arti		is address:
	·		
0			
Special Instruc		in atrustion	o drowing of
	y include below		
now the object	t is to be assembl	ieu and display	eu.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 17, 1983.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature.

DO NOT DETACH

REJECTED

REJECTED

DATE